

CHILDREN'S SERVICES DIVISION

Bill Thomas
Bill Thomas, Administrator

6-12-89
Date

Reviewed by HSS Manager Jean Thorne

Reviewed by AFS Program Manager _____

Reviewed by CSD Program Manager Patricia Melius

Reviewed by AFS Contract Manager Don Walsh

Reviewed by CSD Contract Manager Cheryl Hogue

State Liaison: AFS Medicaid Coordinator

ADULT AND FAMILY SERVICES DIVISION

Jon Yunker
Jon Yunker
Acting Administrator

6-19-89
Date

6/15/89
Date

Date

6-12-89
Date

6/16/89
Date

6-9-89
Date

89-18
87-26
9/14/89
7/1/89



Department of Human Resources

OFFICE OF MEDICAL ASSISTANCE PROGRAMS

PUBLIC SERVICE BUILDING, SALEM, OREGON 97310-0380 PHONE 378-2263

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Transmittal #90-22
Attachment 4.16-A, Part 7
Page 1

COOPERATIVE AGREEMENT BETWEEN THE HEALTH DIVISION AND THE OFFICE OF MEDICAL ASSISTANCE PROGRAMS

1. Purpose

This statement of policy ratifies the agreement previously reached and establishes the roles and responsibilities of the Health Division (HD) and Office of Medical Assistance Programs (OMAP) relative to the provision of, and payment for health services authorized under: Maternal and Child Health Services (MCH) Block Grant (Title V of the Social Security Act), which is administered by the Health Division, State of Oregon; and Title XIX of the Social Security Act, which is administered by Office of Medical Assistance Programs.

2. Objectives

Office of Medical Assistance Programs (OMAP) and the Health Division, of the Oregon Department of Human Resources establish this policy statement with the objectives of:

- a. assuring the coordination and utilization of services provided by these agencies on behalf of low income persons eligible for the services of HD and OMAP.
- b. fostering joint planning efforts toward increasing the effectiveness of the programs in promoting and maintaining the general health and well-being of eligible persons.
- c. maintaining communication and information exchange systems which will minimize the per service costs of the programs and maximize the continuous search for cost-effective means of furthering the common responsibilities of HD and OMAP.
- d. fostering the provision of direct health care by the local public health departments, especially in the areas of well-child examinations, family planning and prenatal care.

3. Continuous Liaison

The primary liaison persons will be the Assistant

1

TN # 90-22	DATE APPROVED 10/26/90
SUPERVISOR 87-27	REVIEW DATE 7/20/90
AN EQUAL OPPORTUNITY EMPLOYER	
COMMENTS	

Administrator, Health Services, Health Division, and the Director, OMAP. The primary liaison persons will serve on the respective agency's advisory committees related to their programs. To assure effective communication between the two agencies on common program objectives, the primary liaison persons will identify staff that will serve as resource persons in each of the following program areas:

- a. Family Planning;
- b. Maternal-Child Health Care;
- c. Nutritional improvement for low income clients
- d. Program eligibility; and
- e. Reimbursement and billing.

These persons shall have the authority to represent their respective agencies in the resolution of programmatic or procedural problems. Any unresolved matters shall be submitted to the two agency primary liaisons.

4. Roles and Responsibilities

- a. OMAP administers the Title XIX Medicaid program under which eligible low income persons are assured access to appropriate and effective health services, as authorized.
- b. HD is administratively responsible for all activities provided under the Title V Maternal and Child Health Block Grant.
- c. The agencies will initiate and maintain appropriate joint program planning activities, policy development and review activities, coordination of services, program monitoring and evaluation activities, and joint training opportunities.
- d. HD, as grantee of the state's MCH Block Grant (Title V) monies, is responsible for the delivery of health services to women and children with focus on low income families and on primary and secondary preventive service. OMAP is responsible for the reimbursement of health services provided to eligible recipients with a special emphasis on perinatal services and screening and assessment through the EPSDT (Early and Periodic Screening, Diagnosis, and Treatment).
- e. The agencies will promote the utilization of public health prevention services and health education

90-22	DATE APPROVED	10/24/90
87-27		7/20/90

opportunities offered through local public health departments to low income populations.

- f. The agencies will work cooperatively to collect, analyze and provide data and/or reports on covered services for eligible recipients. OMAP will provide information to the Health Division's Maternal and Child Health Program on year-end Medicaid payment to all public health billing providers from the 1099 AFS Reports. This information will be useful to both agencies to assure maximum use of federal resources from both Title V and Title XIX. The Health Division will provide health status data and analyses that are appropriate for determining the impact that the respective agencies' programs have upon improving or maintaining the health of recipients.

5. Reimbursement

OMAP agrees to reimburse agencies receiving MCH Block Grant Funds for providing direct patient services to eligible recipients. Payments shall be made to the specific service unit as identified by their Medicaid provider number and provided for in the applicable OMAP Medicaid Provider Guide.

6. Confidentiality

The use or disclosure by any party of any information concerning a recipient of services purchased under this agreement for any purpose not directly connected with the administration of the responsibilities of OMAP or HD with respect to such purchased services, is prohibited except on written consent of the agencies, or the recipients or the recipients's attorney, responsible parent, or guardian. The parties agree to maintain confidentiality to the full extent required under 42 CFR Part 431, Subpart F.

7. Joint Evaluation and Periodic Review

The designated OMAP and HD representatives shall meet not less than annually to review and change or reaffirm this cooperative agreement.

8. Civil Rights

The agencies agree to comply with Section 504, Rehabilitation Act of 1974, Nondiscrimination on the Basis of Handicap and the Civil Rights Act of 1964, as amended.

9. Legal Authority

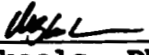
42 CFR Part 431.


TN # 90-22	DATE 10/26/90
SUPPLEMENT 87-27	7/20/90

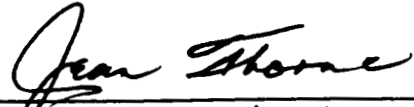
10. Effective Dates

This agreement is effective through June 30, 1991.

11. Signatures


Mike Skeels, Ph.D, MPH
Asst. Dir., Human Resources
Administrator, Health Division

7/18/90
Date

OMAP Contracts Officer


Jean Thorne, Director
Office of Medical Assistance
Programs

7/20/90
Date

TN #	90-22	DATE APPROVED	10/26/90
SUB #	87-27		7/20/90

INTERAGENCY AGREEMENT BETWEEN
OFFICE OF MEDICAL ASSISTANCE PROGRAMS
AND

Transmittal #93-16
Attachment 4.16-A
Part 8, Page 1

MENTAL HEALTH & DEVELOPMENTAL DISABILITY SERVICES DIVISION

This Agreement is made and entered into by and between the Office of Medical Assistance Programs, hereinafter referred to as OMAP and the Mental Health and Developmental Disability Services Division hereinafter referred to as MHDDSD.

I. PURPOSES

- A. The Office of Medical Assistance Programs is the Medical Assistance Unit of the Department of Human Resources (DHR), responsible for Title XIX services in the State of Oregon and for assuring that those services meet all relevant federal regulations. MHDDSD is a sister agency under DHR, responsible for planning, developing, and coordinating services for Developmentally Disabled (DD) and Mentally and Emotionally Disturbed (MHS) clients in the State of Oregon. MHDDSD is also responsible for acting as the Medicaid intermediary for programs serving Alcohol and Drug (A&D) clients in the State of Oregon.
- B. This Agreement authorizes OMAP to use the professional expertise of MHDDSD to assist in administering the Title XIX services listed under Section II. of the Agreement.

II. OBJECTIVES

- A. In order to provide a broad spectrum of coordinated services to Title XIX eligible clients, MHDDSD assumed administrative responsibility for certain Title XIX services. The services MHDDSD currently administers are:
1. Medicaid for Individuals Age 65 and Over in Institutions for Mental Diseases, 42 CFR, Part 441, Subpart C;
 2. Inpatient Psychiatric Services for Individuals Under Age 21 in Psychiatric Facilities or Programs, 42 CFR, Part 441, Subpart D (psychiatric hospitals only);
 3. Rehabilitative Services (Community Mental Health Program), 42 CFR, Part 440.130(d);
 4. Intermediate Care Facilities for the Mentally Retarded, 42 CFR, Part 483, Subpart D;
 5. Miscellaneous Medical Funds and Out of Institutional Medical Care for Title XIX eligible clients in state institutions and state-contracted, privately-operated ICFs/MR;
 6. Title XIX Training (42 CFR 432, Subparts A, B, and C) for MHDDSD providers and staff;

93-16
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7. Home and Community-based services for persons with developmental disabilities under a Social Security Act Section 1915 (c) waiver;
8. Preadmission screening and annual resident review processes for persons suspected of suffering from mental illness or mental retardation who are referred for admission to or are residents in a nursing facility. Social Security Act Section 1919 (e)(7).
9. Case Management Services for eligible persons with developmental disabilities. (Social Security Act Section 1915 (g)).
10. Community mental health services to eligible persons under the age of 21 referred for expanded services as a result of the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, 42 CFR, Part 441, Subpart B;
11. Psychiatric residential services for eligible persons under the age of 21 delivered by a facility accredited by the Joint Commission on Accreditation of Health and Care Organizations, 42 CFR Part 441 Subpart D;
12. Day and Residential Treatment Services (DARTS) provided to eligible persons under the age of 21, 42 CFR, Part 440.130(d); and
13. Personal Care Services provided to adults with mental illness or developmental disabilities, 42 CFR, Part 440.170(f).

III. DEFINITIONS

Title XIX, Medicaid and Medical Assistance - Title XIX of the Social Security Act.

IV. DESIGNATION OF LIAISONS

The primary liaison persons under this Agreement are:

- A. For OMAP: The Assistant Director of DHR for the Office of Medical Assistance Programs.
- B. For MHDDSD: The Assistant Administrator of MHDDSD for the Office of Administrative Services.

V. RESPONSIBILITIES OF EACH PARTY

- A. MHDDSD accepts the following responsibilities for services listed in Section II.:

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Supersedes 89-19

1. Write state administrative rules for Title XIX services listed in Section II., coordinating with OMAP to assure compliance with Title XIX State Plan, OMAP Title XIX Administrative Rules, and federal rules and regulations;
2. Write necessary Title XIX State Plan Amendments and submit to OMAP for processing.
3. Prepare state biennial budgets for Title XIX services and present the budget to the Legislature;
4. Audit ICF/MR providers in accordance with 42 CFR, Part 483, Subpart D;
5. Conduct and/or monitor Utilization Reviews and inspections of care for ICF/MR and Psychiatric Hospital Services in accordance with appropriate sections of 42 CFR, Part 456;
6. Screen clients in order to determine their need for Title XIX, ICF/MR services;
7. Screen clients under age 21 and age 65 or over to determine their need for Title XIX Psychiatric Hospital Services;
8. Screen clients in order to determine their need for Title XIX Psychiatric Residential Services;
9. Screen clients in order to determine their need for Title XIX waiver services;
10. Conduct the PASARR Level II for clients referred by SDDS who are suspected to suffer from mental illness or mental retardation in order to determine the client's need for active treatment and the appropriate treatment setting.
11. Prepare and submit OMAP reports or statistical data necessary to meet federal requirements;
12. Plan and provide Title XIX training for qualified administrative staff in accordance with 42 CFR, Part 432.
13. Provide medical liaison and consultation for Title XIX eligible clients and providers;
14. Reimburse the federal government for audits of MHDDSD Title XIX services and functions that result in disallowance of federal funds. Receive all recoveries from providers or the federal government; and,

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15. Contract with qualified providers for all services administered by MHDDSD.
- B. OMAP retains the following responsibilities for the services listed in Section II., above:
1. Maintain its role as Medical Assistance Unit for the single state agency (Department of Human Resources).
 2. Manage the Title XIX State Plan;
 3. Provide technical support to MHDDSD in administering Title XIX services including providing copies and revisions of the Federal Code of Regulations, Medical Assistance Manuals, Federal Action Transmittals, Title XIX State Plan, OMAP Medicaid Administrative Rules, and appropriate OMAP Procedural Manuals;
 4. Review Title XIX related administrative rules and policies developed by MHDDSD to assure consistency with Federal Regulations and the State Medicaid Plan;
 5. Maintain liaison with Region X, HCFA on Title XIX administrative issues. However, at the request of MHDDSD, OMAP will initiate meeting(s) with Region X and HCFA staff to resolve problems or clarify issues. MHDDSD will participate in all such meetings;
 6. Provide administrative support services to MHDDSD, in the following areas:
 - a. Maintenance of data systems on client, provider, and vendor payments; and
 - b. Preparation of required reports to the federal government.
 7. Provide monthly reports to MHDDSD on the number of clients served, services provided and the total dollars spent, and other detailed information as is available within MMIS and requested by MHDDSD.
 8. Review and monitor MHDDSD's Utilization Review procedures. Provide MHDDSD with any written reports resulting from such monitoring.

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C. OMAP and MHDDSD will:

Comply with Title XIX of the Social Security Act, Federal Medical Assistance Manual, and Federal Regulations governing administration of Title XIX services. Differences between OMAP and MHDDSD regarding interpretation of these regulations will be referred first to the DHR Director and finally to Region X, HCFA.

IV. REGIONAL AND LOCAL OPERATIONS PLANS

Mental Health and Developmental Disability Services Division will enter into contracts with county governments to serve as medical liaison and consultants to Title XIX providers and to coordinate Title XIX services for eligible clients. Within the scope of the MHDDSD/County contracts, the county agencies will function as an administrative extension of the Office of Medical Assistance Programs.

VII. JOINT TRAINING AND ORIENTATION

Title XIX training provided by either OMAP or MHDDSD will be available to relevant staff training with Title XIX clients. MHDDSD staff is understood to include county employees or contractor employees who are providing Title XIX administrative functions by contract with MHDDSD.

VIII. REPORTING, REVIEWING, AND MONITORING

The responsibilities of both OMAP and MHDDSD are listed in Section V.

IX. CONFIDENTIALITY

OMAP and MHDDSD will keep confidential all information on applicants and recipients of Title XIX services, 42 CFR, Part 431, Subpart F. Confidentiality policies apply to all requests for information from outside sources. MHDDSD and OMAP are assuming a partnership role in administering Title XIX services; therefore, neither Division will regard the other as an "outside source" for the purposes of 42 CFR, 431.306(e). It is understood that MHDDSD staff includes those county employees who are providing Title XIX administration by special agreement with MHDDSD.

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